United States Marshals Service

PLAINTIFF UNITED STATES OF AMERICA							COURT CASE NUMBER CR No. 03-10396-NG			
KAM WAI CHUI						-163	TYPE OF PROCESS Preliminary Order of Forfeiture			
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN									
•	Citizens Bank $((37) 337 - 603)$									
AT	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)						***	C.A.		
75 Spring Street, West Roxbury, Massachusetts 02132								<u>r</u>		
							rocess to be served m - 285		· · ·	
United States Attorney's Office John Joseph Moakley United States Courthouse							Number of parties to be served in this case			
							rvice on U.S.A.	<u> </u>		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service) Please serve the attached Preliminary Order of Forfeiture upon the above named institution by certified mail, return receipt requested.										
•						LJT x3283				
Ø PLAINTIFF							TELEPHONE NUMBER		DATE	
							(617) 748-3100		March 15, 2005	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE										
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) Total Process District of Origin No Signature of No No No No Signature of No						Authorized USM	S Deputy or Çlerk	Date	124/05	
I hereby certify and return that I \sum have personally served, \sum have legal evidence of service, \sum have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., shown at the address inserted below.										
I hereby certif	y and return that I am	unable to locate the	e individual, comp	pany, corporation, etc	., named above (See r	remarks below).				
Name and title of individual served (If not shown above).							A person of suitable age and discretion then residing in the defendant's usual place of abode.			
Address (complete only if different than shown above)						Date of S	1	Time Deputy	am pm	
Service Fee	Total Mileage Chat (including endeavoi	rs)		otal Charges	Advance Deposits		Owed to US Marshal	or Amount of	r Refund	
REMARKS:	05 (leik 28 Del	hed #	7004 Daje	1160	000 5t	- 459	8784	C		

PRIOR EDITIONS MAY BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)